

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: STROHECKER ET AL

Serial No. 10/629,333

Group Art Unit: not yet assigned

Filed: 29 July 2003

Examiner: not yet assigned

For:  GRINDER PUMP TANK

* * *

TERMINAL DISCLAIMER

To The Honorable Commissioner
of Patents and Trademarks
Washington, D.C. 20231

Dear Sir:

This petition is accompanied by the required \$65.00 fee as set forth in 37 C.F.R.

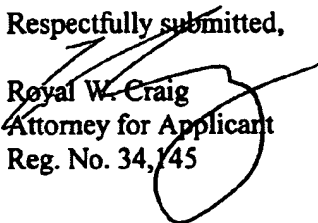
1.20(d). Petitioner, by the undersigned attorney of record, hereby disclaims a terminal part of any patent granted on the above-identified application equivalent to the period of abandonment of the above-identified application commencing on 27 December 2003, and extending to such time as the application may be revived. This agreement is to run with any patent so granted or any application which is entitled to the benefit of the filing date of this application under 35 USC 120, encompasses all claims therein, and is binding upon the grantee, its successors or assigns.

05/17/2005 AWONDAF1 00000056 033565 10629333

02 FC:2814

65.00 DP

Respectfully submitted,


Royal W. Craig
Attorney for Applicant
Reg. No. 34,145

5/14/05

Law Offices of Royal W. Craig
Suite 153
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Baltimore, MD 21202
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65.00 DP

NO JUDGMENT TO BE ENTERED
ON THIS PETITION
UNLESS THE PETITIONER
PAYS THE FEE OF \$65.00
ON OR BEFORE 05/24/05

05/17/2005 AWONDAF1 00000056 033565 10629333
02 FC:2814 65.00 DP
5/14/05

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>6/6/05</u>		2 Serial/Patent # <u>10629333</u>		
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
Filing			\$	
Amendment			\$	
Extension of Time			\$	
Notice of Appeal/Appeal			\$	
Petition			\$	
Issue			\$	
<input checked="" type="checkbox"/> Cert of Correction/Terminal Disc.		5/13/05	\$ 65.00	
Maintenance			\$	
Assignment			\$	
Other			\$	
		7 TOTAL AMOUNT OF REFUND		\$ 65.00
8 TO BE REFUNDED BY:				
		<input checked="" type="checkbox"/> Treasury Check		
10 REASON:		Credit Deposit A/C #:		
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<input checked="" type="checkbox"/> No Fee Due (Explanation):				
No TD is required.				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Liana Chase</u>		TITLE: <u>Paralegal</u>		
SIGNATURE: <u>Liana Chase</u>		PHONE: <u>272-3206</u>		
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